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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

SEP 20 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 7, 2011

THOMAS DOUGHERTY  
LOMMEN, ABDO, COLE, KING & STAGEBERG  
80 SOUTH EIGHTH STREET, SUITE 2000  
MINNEAPOLIS, MN 55402

SUBJECT: THE COMMA CLUB, LLC  
Ref. Number: W11000046164

We have received your document for THE COMMA CLUB, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 711A00020735

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August 31, 2011

Florida Department of State  
Division of Corporations  
Registration Section  
P O Box 6327  
Tallahassee, FL 32314

Re: The Comma Club, LLC  
Our File No. 38326

Dear Sir/Madam:


Enclosed for filing, relative to the above-named company, please find the following:

1. Cover Letter;
2. An original and one copy of Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
3. Certificate of Designation of Registered Agent/Registered Office; and
4. Our firm check in the amount of \$125 to cover the filing fee.

If you have any questions, please contact us. Thank you.

Very truly yours,

LOMMEN, ABDO, COLE, KING & STAGEBERG, P.A.

By   
Janice K. Hanson  
Paralegal

Enclosures

cc: David A. LaRue

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Comma Club, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Thomas F. Dougherty

Name of Person

Lommen, Abdo, Cole, King & Stageberg, P.A.

Firm/Company

80 South Eighth Street, Suite 2000

Address

Minneapolis, MN 55402

City/State and Zip Code

dave@baldwinsupply.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas F. Dougherty

Name of Person

at ( 612 ) 336-9330

Area Code & Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

**1. The Comma Club, LLC**

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

**2. Minnesota**

(Jurisdiction under the law of which foreign limited liability company is organized)

**3. 45-2684615**

(FEI number, if applicable)

**4. June 23, 2011**

(Date of Organization)

**5. Perpetual**

(Duration: Year limited liability company will cease to exist or "perpetual")

**6. N/A**

(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

**7. 529 Island Court**

**Indian Harbour Beach, FL 32937**

(Street Address of Principal Office)

**8. If limited liability company is a manager-managed company, check here ☐**

**9. The name and usual business addresses of the managing members or managers are as follows**


**David A. LaRue, 529 Island Court, Indian Harbour Beach, FL 32937**

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TALLAHASSEE, FLORIDA

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10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

**11. Nature of business or purposes to be conducted or promoted in Florida: Consulting**

  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

**David A. LaRue**

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

The Comma Club, LLC

If unavailable, the alternate to be used in the state of Florida is:

\_\_\_\_\_

2. The name and the Florida street address of the registered agent and office are:

David A. LaRue

(Name)

529 Island Court

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Indian Harbour Beach FL 32937

City/State/Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.*



(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: The Comma Club, LLC

Date filed: 6/23/2011

File Number: 4354786-2

Minnesota Statutes, Chapter: 322B

Home Jurisdiction: Minnesota

This certificate reflects data thru: 8/31/2011

This certificate has been issued on: 9/14/2011



*Mark Ritchie*

Mark Ritchie  
Secretary of State  
State of Minnesota